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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jonathan First name E. Middle name Arcouette Last name and Suffix (Sr., Jr., II, III)	Heather First name A. Middle name Arcouette Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0263	xxx-xx-4128

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Debtor 1 Jonathan E. Arcouette
Debtor 2 Heather A. Arcouette

Case number (if known)

ness name or EINs.	
ent address:	
& ZIF Code	
County	
ess is different from yours, fill it will send any notices to this	
City, State & ZIP Code	
s before filing this petition, I ict longer than in any other n. C. § 1408.)	
ei Sid	

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Debtor 1 Jonathan E. Arcouette Debtor 2 Heather A. Arcouette Case number (if known) Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the Yes. last 8 years? Northern District of 11/29/11 11-85093 District Illinois When Case number **Northern District of** 8/12/10 10-74050 District When Case number Illinois When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Relationship to you Debtor When District Case number, if known Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Debtor 1 Jonathan E. Arcouette

Deb	otor 2 Heather A. Arcoue	ette			Case number (if known)		
Par	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code		
	it to this petition.		Checi	the appropriate bo	x to describe your business:		
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ns, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to public health or safety?		What is	he hazard?			
	Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number Chart City Chart & 7th Code		
					Number, Street, City, State & Zip Code		

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Debtor 1 Jonathan E. Arcouette
Debtor 2 Heather A. Arcouette

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-80384 Doc 1 Filed 02/24/17 Entered 02/24/17 15:20:07 Desc Main

Deb Deb	tor 1 Jonathan E. Arcou		Documer	nt Page 6 o	f 84 Case number	(if known)
Part	6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily cor individual primarily for a perso			ed in 11 U.S.C. § 101(8) as "incurred by an
			■ No. Go to line 16b.			
			☐ Yes. Go to line 17.			
		16b.	Are your debts primarily bus money for a business or inves			
			☐ No. Go to line 16c.	anone or anough the	operation of the bush	ioso of invosations.
			Yes. Go to line 17.			
		16c.	State the type of debts you ow	e that are not consur	mer debts or business	s debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	'. Go to line 18.		
	Do you estimate that		I am filing under Chapter 7. Do are paid that funds will be avai			erty is excluded and administrative expenses
	administrative expenses are paid that funds will		□ No			
	be available for distribution to unsecured creditors?		Yes			
18.	How many Creditors do	□ 1-49		1 ,000-5,000		2 5,001-50,000
	you estimate that you owe?	■ 50-99 □ 100-1 □ 200-9	99	□ 5001-10,000 □ 10,001-25,00		☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 -		☐ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000 ,001 - \$500,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million		1 - \$500 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$	550,000 001 - \$100,000	□ \$1,000,001 - □ \$10,000,001		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion
	to be?	_ ' '	,001 - \$500,000	□ \$50,000,001	- \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500.	001 - \$1 million	\$100,000,00	01 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have ex	camined this petition, and I decla	are under penalty of p	erjury that the inform	ation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
			rney represents me and I did no nt, I have obtained and read the			an attorney to help me fill out this
		I request	relief in accordance with the ch	apter of title 11, Unite	ed States Code, spec	ified in this petition.
		bankrupt and 357	tcy case can result in fines up to 1.		onment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			athan E. Arcouette an E. Arcouette		/s/ Heather A. Ar	
			e of Debtor 1		Signature of Debtor	

Executed on February 24, 2017 MM / DD / YYYY

Executed on February 24, 2017 MM / DD / YYYY

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Debtor 1	Jonathan E. Arcouette		
Debtor 2	Heather A. Arcouette	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Erin Na	ısh	Date	February 24, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Erin Nash			
Printed name			
Loves Par	k Legal Clinic		
Firm name			
535 Loves	Park Drive		
Loves Par	k, IL 61111		
Number, Street,	City, State & ZIP Code		
Contact phone	815-654-3060	Email address	erin.nash1@gmail.com
6304953			
Bar number & S	tato		

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		DOCUME	<u>eni Pade 8 di 84</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan E. Arco	uette		
	First Name	Middle Name	Last Name	
Debtor 2	Heather A. Arcou	ette		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	185,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	35,310.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	220,310.00
Pa	t 2: Summarize Your Liabilities		
			abilities : you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	222,518.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	188,768.94
	Your total liabilities	\$	411,286.94
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,902.30
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,061.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
	■ Yes		
7.	What kind of debt do you have?		
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ı personal,	family, or

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Jonathan E. Arcouette Heather A. Arcouette	Case number (if known)	n)		

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official For 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	n \$
--	------

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	ıl claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	18,539.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	18,539.00

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	Oas	C 17 0000	+ D 001	Doc	ument	Page 10 of 84	1 10.20.01	D 00	o man	
Fill i	n this informa	tion to identify	your case and th							
Debt	or 1	Jonathan E.	Arcouette							
		First Name		Name		Last Name				
Debte Spous	or 2 se, if filing)	Heather A. A	Arcouette Middle	Name		Last Name				
Inite	nd States Rank	ruptcy Court for	the: NORTHER	N DIST	RICT OF ILLI	NOIS				
J11110	a Clatos Barik	ruptoy Court for	uio. Northier		11101 01 1221					
Case	number					_		ļ	Check if this is an amended filing	
									amended ming	
Դքք:	cial Form	n 106A/E	2							
_			_							
		A/B: Pı	<u> </u>			an asset fits in more than one			12/15	
nform		pace is needed,				e are filing together, both are e le top of any additional pages,				
Part 1	: Describe Ea	ch Residence, B	uilding, Land, or Ot	her Real	Estate You Ov	vn or Have an Interest In				
. Do	you own or hav	e any legal or eq	uitable interest in a	ny resid	ence, building	, land, or similar property?				
	No. Go to Part 2.	i								
.	Yes. Where is th	ne property?								
1.1				What	is the propert	y? Check all that apply				
_	231 Old Mea	idow Lane vailable, or other des	cription		Single-family	home			ms or exemptions. Put	
	Street address, if a	valiable, of other des	сприоп		Creditors			unt of any secured claims on Schedule D: s Who Have Claims Secured by Property.		
					Condominium	or cooperative				
	_				Manufactured	or mobile home	Current value of	the	Current value of the	
_	Rockton	IL	61072-0000		Land		entire property?		portion you own?	
	City	State	ZIP Code		Investment pr Timeshare	operty	\$185,00		\$185,000.00	
					Other				ur ownership interest ncy by the entireties, or	
				Who		t in the property? Check one	a life estate), if k	nown.		
	Winnebago				Debtor 1 only Debtor 2 only		ree simple			
_	County			_	Debtor 1 and	Debtor 2 only				
						f the debtors and another	Check if this (see instruction		nunity property	
					-	ou wish to add about this item	n, such as local			
				prope	erty identificati	on number:				
2. A	dd the dollar	value of the po	ortion you own fo	r all of	your entries	from Part 1, including any	entries for		040F 222 22	
									\$185,000.00	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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ebto		onathan E. Arcouette leather A. Arcouette		Case number (if known)	
Ca	s, vans,	trucks, tractors, sport utility v	ehicles, motorcycles		
1	10				
\	'es				
3.1	Make:	Dodge	Who has an interest in the property? Check one	the amount of any secu	claims or exemptions. Put red claims on Schedule D:
	Model:	Ram	Debtor 1 only	Creditors Who Have Cl	aims Secured by Property.
	Year:	2006 nate mileage: 144,000	Debtor 2 only	Current value of the	Current value of the
		nate mileage: 144,000	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
	Other in	omation.	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$10,000.00	\$10,000.0
3.2	Make:	Cadillac	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	STS	Debtor 1 only		aims Secured by Property.
	Year:	2005	Debtor 2 only	Current value of the	Current value of the
		nate mileage: 93,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.0
.3	Make:	Chevrolet Corvette	Who has an interest in the property? Check one Debtor 1 only	the amount of any secu	claims or exemptions. Put red claims on Schedule D. aims Secured by Property.
	Year:	1992	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage: 167,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	\square At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$2,000.00	\$2,000.0
	<i>mples:</i> B lo		nd other recreational vehicles, other vehicles, a vatercraft, fishing vessels, snowmobiles, motorcycle		
			wn for all of your entries from Part 2, including that number here		\$15,000.00
		be Your Personal and Household			
о ус	ou own o	or have any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secure claims or exemptions.
Ex	amples: No	goods and furnishings Major appliances, furniture, linen	s, china, kitchenware		
	res. De	scribe			
		Eurniture for li	ving room, dining room, and three bedroo	me	\$1.000

Official Form 106A/B Schedule A/B: Property page 2

Document Page 12 of 84 Debtor 1 Jonathan E. Arcouette Debtor 2 Heather A. Arcouette Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Television in living room (approx. 10 years old), son's laptop \$500.00 computer, 50" LED television, Debtor 1's desktop computer 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Everyday wearing apparel \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$500.00 Debtor 2's wedding band and engagement ring Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$100.00 3 dogs and 2 cats 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the

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page 3

portion you own?
Do not deduct secured

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Debtor 1 Debtor 2		n E. Arcouette A. Arcouette	Case number (if know	m)
				claims or exemptions.
□ No	mples: Money y	you have in your wallet, in your	home, in a safe deposit box, and on hand when you file your pe	tition
			Cash	\$10.00
Exai □ No	institutio	g, savings, or other financial ac ons. If you have multiple accour	ccounts; certificates of deposit; shares in credit unions, brokeragnts with the same institution, list each. Institution name:	je houses, and other similar
■ Ye	S		insututon name.	
		17.1. Checking	Members Alliance Credit Union	\$1,000.00
	mples: Bond fu	nds, or publicly traded stocks nds, investment accounts with b	prokerage firms, money market accounts	
	S	Institution or issue	er name:	
	venture	ed stock and interests in incor	porated and unincorporated businesses, including an inter	est in an LLC, partnership, and
		c information about them Name of entity:		
Neg	otiable instrum -negotiable ins	ents include personal checks, c	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
		c information about them Issuer name:		
	<i>mples:</i> Interest	sion accounts s in IRA, ERISA, Keogh, 401(k)	, 403(b), thrift savings accounts, or other pension or profit-sharin	ng plans
■ Ye	s. List each ac	count separately. Type of account:	Institution name:	
		401(k)	State Street Bank and Trust Co.	\$5,000.00
You	r share of all ur <i>mples:</i> Agreem		so that you may continue service or use from a company it, public utilities (electric, gas, water), telecommunications comp	panies, or others
	s		Institution name or individual:	
23. Ann ı ■ No	•	act for a periodic payment of mo	ney to you, either for life or for a number of years)	
	S	Issuer name and description.		
	S.C. §§ 530(b)	cation IRA, in an account in a (1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition p	orogram.
	S	Institution name and descript	ion. Separately file the records of any interests.11 U.S.C. § 521((c):
25. Trus	ts, equitable c	or future interests in property	(other than anything listed in line 1), and rights or powers e	exercisable for your benefit

■ No

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Debtor 1 Debtor 2	Jonathan E. Arcouette Heather A. Arcouette			ase number (if known)	
☐ Yes	s. Give specific information about the	nem			
	nts, copyrights, trademarks, tradenples: Internet domain names, webs			ds.	
■ No □ Yes	. Give specific information about th	nem			
	ses, franchises, and other generangles: Building permits, exclusive lides.		n holdings, liquor licens	es, professional licens	es
	s. Give specific information about the	nem			
Money o	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	efunds owed to you				
■ No □ Yes	s. Give specific information about th	em. including whether you alre	eady filed the returns and	d the tax vears	
		,			
_Exan	y support nples: Past due or lump sum alimon	ny, spousal support, child supp	ort, maintenance, divorc	e settlement, property	settlement
□ No ■ Yes	s. Give specific information				
		Debtor 2 is owed child s likelihood she'll act			
		not good. Her child			
-		Connecticut.		Child Support	\$10,000.00
Exan	r amounts someone owes you nples: Unpaid wages, disability insu benefits; unpaid loans you m	rance payments, disability ber			
■ No □ Yes 31. Intere	nples: Unpaid wages, disabil <mark>i</mark> ty insu benefits; unpaid loans you m	rance payments, disability ber lade to someone else	efits, sick pay, vacation	pay, workers' comper	nsation, Social Security
Exam No Yes 31. Intere Exam No	nples: Unpaid wages, disability insu benefits; unpaid loans you m G. Give specific information ests in insurance policies	arance payments, disability ber hade to someone else ance; health savings account e	efits, sick pay, vacation	pay, workers' comper	nsation, Social Security
Exam No Yes 31. Intere Exam No	nples: Unpaid wages, disability insubenefits; unpaid loans you metals. Give specific information ests in insurance policies inples: Health, disability, or life insurance. Name the insurance company of Company in	arance payments, disability ber hade to someone else ance; health savings account e	refits, sick pay, vacation (HSA); credit, homeowned Beneficiary	pay, workers' comper	nsation, Social Security nce Surrender or refund
Exam No Yes 31. Intere Exam No	nples: Unpaid wages, disability insubenefits; unpaid loans you must. Give specific information ests in insurance policies anples: Health, disability, or life insurance. S. Name the insurance company of Company of Company of Cigna Life (no surre	arance payments, disability ber lade to someone else ance; health savings account leach policy and list its value. Iname: e Insurance nder value)	refits, sick pay, vacation (HSA); credit, homeowned Beneficiary	pay, workers' comperers, or renter's insurar	nsation, Social Security nce Surrender or refund value:
Exam No Yes 31. Intere Exam No	nples: Unpaid wages, disability insubenefits; unpaid loans you must. Give specific information ests in insurance policies anples: Health, disability, or life insurance. S. Name the insurance company of Company of Company of Cigna Life (no surre	arance payments, disability ber lade to someone else ance; health savings account leach policy and list its value.	efits, sick pay, vacation HSA); credit, homeowne Beneficiary	pay, workers' comperers, or renter's insurar	nsation, Social Security nce Surrender or refund value:
Exam No Yes 31. Intere Exam No Yes 32. Any i If you some No	nples: Unpaid wages, disability insubenefits; unpaid loans you must. Give specific information sets in insurance policies anples: Health, disability, or life insuration. S. Name the insurance company of Company of Company of Company of Cigna Life (no surre	arance payments, disability ber lade to someone else ance; health savings account eleach policy and list its value. lame: e Insurance ander value) systems USA, Inc. (HSA) u from someone who has die	HSA); credit, homeowned Beneficiary Jonathar	pay, workers' comperer's, or renter's insurar Arcouette Arcouette	sation, Social Security Surrender or refund value: \$0.00
Exam No Yes 31. Intere Exam No Yes 32. Any i If you some No Yes 33. Claim	nples: Unpaid wages, disability insubenefits; unpaid loans you must be sets in insurance policies nples: Health, disability, or life insurance. Cigna Life (no surred) Payflex Saccount) Interest in property that is due you are the beneficiary of a living trust cone has died.	ance; health savings account and account accou	HSA); credit, homeowned Beneficiary Jonathar Jonathar ad Issurance policy, or are continuous policy, or are continuous policy.	pay, workers' comperer's, or renter's insurar Arcouette Arcouette urrently entitled to rece	sation, Social Security Surrender or refund value: \$0.00

Debtor 1	Case 17-8				Entered 02/24/17 15 Page 15 of 84	:20:07	Desc Main
Debtor 2	Heather A. A.				Case numb	er (if known)	
☐ Yes.	Describe each cla	aim					
■ No	_	-	ed claims of	every nature, including	g counterclaims of the debtor a	nd rights to	set off claims
☐ Yes.	Describe each cla	aim					
■ No	nancial assets yo		already list				
					ny entries for pages you have a		\$16,010.00
Part 5: De	escribe Any Busines	ss-Related F	Property You	Own or Have an Interest	n. List any real estate in Part 1.		
□ No. Go	own or have any lego to Part 6. Go to line 38.	gal or equita	able interest i	in any business-related p	operty?		
							Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou	ınts receivable or	commissi	ions you alr	eady earned			
■ No							
⊔ Yes.	Describe						
Exam _i ■ No	equipment, furni ples: Business-rela Describe			re, modems, printers, co	piers, fax machines, rugs, telepho	ones, desks,	chairs, electronic devices
□ No	nery, fixtures, equ	uipment, s	supplies you	ı use in business, and	tools of your trade		
		Tools				\neg	\$500.00
		10015					
		Auto rep	pair tools			\neg	\$1,300.00
41. Invent ■ No □ Yes	ory Describe						
	2000						
■ No	sts in partnership						
⊔ Yes.	Give specific info		oout them of entity:		% of owner	rship:	
■ No.	mer lists, mailing		-				
∐ Do yo	our lists include pers	sonally iden	ntifiable inforr	mation (as defined in 11 U.	S.C. § 101(41A))?		
	■ No						

Official Form 106A/B Schedule A/B: Property

		Doc 1	Filed 02/24/17 Document	Entered 0 Page 16 of	2/24/17 15:20:07 84	Desc Main
Debtor 1 Debtor 2	Jonathan E. Arcouette Heather A. Arcouette	•		Ü	Case number (if known)	
	Yes. Describe					
4. Any bi	usiness-related property yo	u did not a	ılready list			
■ No						
☐ Yes.	Give specific information					
	the dollar value of all of you art 5. Write that number her					\$1,800.00
	escribe Any Farm- and Commer you own or have an interest in farm			vn or Have an Intere	st In.	
6. Do yo ı	u own or have any legal or e	equitable i	nterest in any farm- or	commercial fishir	ng-related property?	
■ No.	. Go to Part 7.					
☐ Yes	s. Go to line 47.					
Part 7:	Describe All Property You O	wn or Have	an Interest in That You Di	d Not List Above		
2 Do voi	u have other property of any	y kind you	did not already list?			
	ples: Season tickets, country					
■ No	•		·			
☐ Yes.	Give specific information					
54. Add	the dollar value of all of you	ır entries f	rom Part 7. Write that i	number here		\$0.00
					!	
Part 8:	List the Totals of Each Part of	this Form				
55. Part	1: Total real estate, line 2					\$185,000.00
6. Part	2: Total vehicles, line 5			\$15,000.00		
7. Part	3: Total personal and house	ehold item	s, line 15	\$2,500.00		
58. Part	4: Total financial assets, lin	e 36	_	\$16,010.00		
59. Part	5: Total business-related pr	roperty, lin	e 45	\$1,800.00		
60. Part	6: Total farm- and fishing-re	elated prop	perty, line 52	\$0.00		
61. Part	7: Total other property not I	listed, line	54 +	\$0.00		
32. Tota l	l personal property. Add line	es 56 throug	gh 61	\$35,310.00	Copy personal property to	otal \$35,310.0 0
63. Total	l of all property on Schedule	e A/B Add	line 55 + line 62			\$220,340,00

Official Form 106A/B Schedule A/B: Property page 7

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		17(7(3)))))	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan E. Arco	ouette		
	First Name	Middle Name	Last Name	
Debtor 2	Heather A. Arcou	ette		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if the
				amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions a	re you claiming	? Check one only	, even if you	r spouse is filing	g with y	you.
----	---------------------------	-----------------	------------------	---------------	--------------------	----------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
231 Old Meadow Lane Rockton, IL 61072 Winnebago County	\$185,000.00		\$185,000.00	735 ILCS 5/12-112
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2005 Cadillac STS 93,000 miles Line from Schedule A/B: 3.2	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(c)
Line from Scriedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
1992 Chevrolet Corvette 167,000 miles	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
Furniture for living room, dining room, and three bedrooms	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Television in living room (approx. 10 years old), son's laptop computer,	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
50" LED television, Debtor 1's desktop computer Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

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Jonathan E. Arcouette Debtor 1 Heather A. Arcouette Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Everyday wearing apparel** 735 ILCS 5/12-1001(a) \$400.00 \$400.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Debtor 2's wedding band and 735 ILCS 5/12-1001(b) \$500.00 \$500.00 engagement ring П Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 3 dogs and 2 cats 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$10.00 \$10.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Members Alliance Credit** 735 ILCS 5/12-1001(b) \$1,000.00 \$1,000.00 Union Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): State Street Bank and Trust 735 ILCS 5/12-1006 \$5,000.00 \$5,000.00 Co. Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Cigna Life Insurance 215 ILCS 5/238 \$0.00 \$0.00 (no surrender value) Beneficiary: Jonathan Arcouette 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit **Tools** 735 ILCS 5/12-1001(d) \$500.00 \$500.00 Line from Schedule A/B: 40.1 П 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Are you claiming a	homestead	exemption of	f more th	ıan \$160,375?
----	--------------------	-----------	--------------	-----------	----------------

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No
 - Yes

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	Document	Page 19	9 of 84		
Fill in this information to identify	your case:				
Debtor 1 Jonathan E. A	Arcountto				
First Name	Middle Name	Last Name			
Debtor 2 Heather A. A	rcouette				
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for t	he: NORTHERN DISTRICT OF IL	LINOIS			
Casa number					
Case number (if known)				☐ Check	if this is an
(,					ded filing
					ica ming
Official Form 106D					
Schedule D: Credito	rs Who Have Claims	Secure	d by Propert	У	12/15
	le. If two married people are filing toge I it out, number the entries, and attach i				
1. Do any creditors have claims secure	d by your property?				
\square No. Check this box and subm	nit this form to the court with your other	er schedules. \	ou have nothing else t	o report on this form.	
Yes. Fill in all of the informati	on helow		-		
	on below.				
Part 1: List All Secured Claims			0.1	0.1. 0	0.1.0
for each claim. If more than one creditor	as more than one secured claim, list the c has a particular claim, list the other creditor betical order according to the creditor's na	ors in Part 2. As	Y Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Chase Bank	Describe the property that secures	s the claim:	\$195,000.00	\$185,000.00	\$10,000.00
Creditor's Name	231 Old Meadow Lane Roc 61072 Winnebago County	kton, IL			
DO D	As of the date you file, the claim is	S: Check all that			
PO Box 9001871	apply.				
Louisville, KY 40290	_ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
WII	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply				
Debtor 1 only	☐ An agreement you made (such as	s mortgage or se	ecured		
■ Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, m	nechanic's lien)			
☐ At least one of the debtors and another	er				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	First Mort	gage		
Date debt was incurred 2009	Last 4 digits of account nur	mber <u>2627</u>			
	Book Market and the second		AF 540.00	#40.000.00	** **
2.2 Credit Acceptance	Describe the property that secures		\$5,518.00	\$10,000.00	\$0.00
Creditor's Name	2006 Dodge Ram 144,000 r	niles			
DO Poy 542					
PO Box 513 Bankruptcy Dept.	As of the date you file, the claim is	3: Check all that			
Southfield, MI 48037	apply.				
· ·	_ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who awas the debt? Obselves	Disputed	_			
Who owes the debt? Check one.	Nature of lien. Check all that apply				
Debtor 1 only	An agreement you made (such as	s mortgage or se	ecured		
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, m	nechanic's lien)			
☐ At least one of the debtors and another	er				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt	· -				
Date debt was incurred 2013	Last 4 digita of appoint	mbor			
Date dent was inculted ZUIS	Last 4 digits of account nur	IIDEI			

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Debtor 1 Jonathan E. Arcouette		e number (if know)		
First Name Middle N	ame Last Name			
Debtor 2 Heather A. Arcouette	Last Mana			
First Name Middle N	lame Last Name			
2.3 Credit Acceptance	Describe the property that secures the claim:	\$12,000.00	\$3,000.00	\$9,000.00
Creditor's Name	2005 Cadillac STS 93,000 miles			
PO Box551888	As of the date you file, the claim is: Check all that			
Detroit, MI 48255-1888	apply.			
	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 2015	Last 4 digits of account number 7269			
2.4 Credit Acceptance	Describe the property that secures the claim:	\$10,000.00	\$2,000.00	\$8,000.00
Creditor's Name	1992 Chevrolet Corvette 167,000			
	miles			
PO Box 513	As of the date you file, the claim is: Check all that			
Bankruptcy Dept.	apply.			
Southfield, MI 48037	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt? Ohead, and	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured car loan)			
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2015	Last 4 digits of account number 0306			
Add the dollar value of your entries in C				
If this is the last page of your form, add	Column A on this page. Write that number here:	\$222,518.00 \$222,518.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			D	ocument	Page 2	l of 84		
Fill in	this inform	ation to identify your	case:					
Debtor	· 1	Jonathan E. Arco	uette					
		First Name	Middle Nan	пе	Last Name		-	
Debtor		Heather A. Arcou					_	
(Spouse	if, filing)	First Name	Middle Nan	ne	Last Name			
United	States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINOIS		_	
Case r	number						_	theck if this is an mended filing
		106E/F F: Creditors W	/ho Have l	Jnsecured	Claims			12/15
Schedul Schedul left. Atta name ar Part 1:	le G: Execute le D: Credito ach the Cont nd case num List All any creditor No. Go to Pa	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known). of Your PRIORITY Un rs have priority unsecured art 2.	ired Leases (Offi ured by Property e. If you have no secured Claim	cial Form 106G). If more space is information to re	Do not include a needed, copy t	any creditors with partic he Part you need, fill it	ally secured claims out, number the en	that are listed in tries in the boxes on the
	Yes.							
Part 2:		of Your NONPRIORIT						
	-	rs have nonpriority unsec	_	-	your other sche	dules.		
uns tha	secured claim	nonpriority unsecured clands the creditor separately repended a particular claim, linds a partic	y for each claim. F	or each claim listed	d, identify what ty	ype of claim it is. Do not I	ist claims already inc	cluded in Part 1. If more
								Total claim
4.1		e and Safety Creditor's Name	L	ast 4 digits of acc	ount number	Arcouette's Garage		\$150.00
	PO Box		V	Vhen was the deb	t incurred?			-
	Number Str	reet City State Zlp Code red the debt? Check one.		As of the date you	file, the claim i	s: Check all that apply		
	Debtor 1	1 only	г	☐ Contingent				
	Debtor 2	2 only		☐ Unliquidated				
	_	1 and Debtor 2 only		Disputed				
	_	one of the debtors and and	_	⊐ Disputed Type of NONPRIOF	RITY unsecured	l claim:		
		if this claim is for a com	- T	Student loans				
	debt	n subject to offset?	nunity [ration agreement or divor	rce that you did not	
	No No					g plans, and other similar	debts	
	☐ Yes		ı	Other. Specify				_

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2 Heather A. Arcouette	Case number (if know)	
Account Recovery Solutions	Last 4 digits of account number 46N5	\$1,284.00
Nonpriority Creditor's Name 5183 Harlem Road	When was the debt incurred?	
Loves Park, IL 61111 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
Account Recovery Solutions	Last 4 digits of account number 46N6	\$251.00
Nonpriority Creditor's Name 5183 Harlem Road Loves Park, IL 61111	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Account Recovery Solutions	Last 4 digits of account number 46N9	\$175.00
Nonpriority Creditor's Name 5183 Harlem Road Loves Park, IL 61111	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	
	— Other. Specify	

Debtor 1 Jonathan E. Arcouette

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Debtor 1 Jonathan E. Arcouette Case number (if know) Debtor 2 Heather A. Arcouette 4.5 **Advance Auto Parts** Last 4 digits of account number 7107 \$3,633.42 Nonpriority Creditor's Name 5008 Airport Road When was the debt incurred? Roanoke, VA 24012 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Advia Credit Union** 4.6 Last 4 digits of account number \$500.00 Nonpriority Creditor's Name 769 N Blackhawk Blvd. When was the debt incurred? Rockton, IL 61072 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.7 All Data Last 4 digits of account number 1417 \$1,672.00 Nonpriority Creditor's Name 9650 W. Taron Drive When was the debt incurred? Elk Grove, CA 95757 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 2	Jonathan E. Arcouette Heather A. Arcouette	Case number (if know)	
4.8	Associated Collectors Inc.	Last 4 digits of account number 8595	\$600.00
	Nonpriority Creditor's Name 113 W. Milwaukee Street Janesville, WI 53545	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
	Associated Collectors Inc. Nonpriority Creditor's Name	Last 4 digits of account number 5045	\$143.00
	113 W. Milwaukee Street Janesville, WI 53545	When was the debt incurred?	
_	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Associated Collectors Inc.	Last 4 digits of account number 4821	\$141.00
	Nonpriority Creditor's Name 113 W. Milwaukee Street	When was the debt incurred?	
	Janesville, WI 53545 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify	

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Debto Debto	or 1 Jonathan E. Arcouette Heather A. Arcouette	Case number (if know)	
4.1 1	Associated Collectors Inc.	Last 4 digits of account number 5461	\$130.00
	Nonpriority Creditor's Name 113 W. Milwaukee Street Janesville, WI 53545	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Associated Collectors Inc.	Last 4 digits of account number 8130	\$62.00
	Nonpriority Creditor's Name 113 W. Milwaukee Street Janesville, WI 53545	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 3	ATS	Last 4 digits of account number 0485	\$407.00
	Nonpriority Creditor's Name 6419 Material Avenue Loves Park, IL 61111	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Heather A. Arcouette	Case number (if know)	
Attorney Brian Larkin		\$2,400.00
Nonpriority Creditor's Name 1 Court Place #301	Last 4 digits of account number When was the debt incurred?	Ψ2,400.00
Rockford, IL 61101 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Attorney Thomas Ruud	Last 4 digits of account number	\$1,300.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,500.00
318 North 1st Street Rockford, IL 61107	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Auto Zone	Last 4 digits of account number 0289	\$8,000.00
Nonpriority Creditor's Name		<u>-</u>
PO Box 791409	When was the debt incurred?	
Baltimore, MD 21279-1409 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	_	
□ res	Other. Specify	

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Debto Debto	or 1 Jonathan E. Arcouette Heather A. Arcouette		Case number (if know)	
4.1 7	Bank of America	Last 4 digits of account number	3176	\$1,170.00
	Nonpriority Creditor's Name PO Box 10556 Atlanta, GA 30348-5576	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1 8	Bryden Motors	Last 4 digits of account number	P106	\$200.00
	Nonpriority Creditor's Name 548 Broad Street Beloit, WI 53511	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Bud Weiser Motors	Last 4 digits of account number	Arcouette	\$250.00
9	Nonpriority Creditor's Name 2676 Milwaukee Road	When was the debt incurred?	Automotive	Ψ200.00
	Beloit, WI 53511	_		
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	П		
	Debtor 2 only	☐ Contingent		
	<u> </u>	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debt	or 2 Heather A. Arcouette		Case number (if know)	
4.2	Capital One Bank	Last 4 digits of account number	3894	\$1,708.00
0]	Nonpriority Creditor's Name 1500 Capital One Drive Henrico, VA 23238	When was the debt incurred?	2011	41,1 00100
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.		,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2 1	Capital Stack LLC	Last 4 digits of account number	4630	\$19,740.00
	Nonpriority Creditor's Name 11 Broadway Suite 814	When was the debt incurred?		
	New York, NY 10004	_		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes			
4.2	Central Credit Services	Last 4 digits of account number	6971	\$466.00
	Nonpriority Creditor's Name 20 Corporate Hills Drive	When was the debt incurred?		
	Saint Charles, MO 63301 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Debtor 1 Jonathan E. Arcouette

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Debtor Debtor	1 Jonathan E. Arcouette 2 Heather A. Arcouette		Case number (if know)	
4.2 3	Charter Business Solutions	Last 4 digits of account number	6270	\$1,500.00
	Nonpriority Creditor's Name 12405 Powerscourt Drive Saint Louis, MO 63131	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	Chicago Behavioral Health Nonpriority Creditor's Name	Last 4 digits of account number	1938	\$2,049.00
	555 Wilson Lane Des Plaines, IL 60016	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2 5	Citizens Finance	Last 4 digits of account number	0001	\$4,832.00
	Nonpriority Creditor's Name 6457 North 2nd Street Loves Park, IL 61111	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		o poon,		

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Debtor Debtor	1 Jonathan E. Arcouette 2 Heather A. Arcouette		Case number (if know)	
4.2 6	Citizens Finance	Last 4 digits of account number	9700	\$6,365.99
	Nonpriority Creditor's Name 6457 North 2nd Street Loves Park, IL 61111	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.2	City of Chicago	Last 4 digits of account number	8000	\$244.00
	Nonpriority Creditor's Name PO Box 8073 Chicago, IL 60680-8073	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	CMI Credit Mediators Nonpriority Creditor's Name	Last 4 digits of account number	3054	\$4,622.36
	PO Box 456 Upper Darby, PA 19082	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		

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Debtor Debtor	Jonathan E. Arcouette Heather A. Arcouette		Case number (if know)	
4.2 9	Complete Payment Recovery	Last 4 digits of account number	9893	\$244.25
	Nonpriority Creditor's Name 3500 5th Street	When was the debt incurred?		
	Northport, AL 35476 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.3	Creditors Protection Service	Last 4 digits of account number	2187	\$669.00
	Nonpriority Creditor's Name 206 W. State Street Rockford, IL 61101	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Creditors Protection Service	Last 4 digits of account number	4720	\$401.00
	Nonpriority Creditor's Name 206 W. State Street Rockford, IL 61101	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debt	Pr 2 Heather A. Arcouette	Case number (if know)	
4.3	Creditors Protection Service	Last 4 digits of account number 2689	\$252.00
<u>'</u>)	Nonpriority Creditor's Name 206 W. State Street Rockford, IL 61101	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.3	Creditors Protection Service	Last 4 digits of account number 4625	\$252.00
	Nonpriority Creditor's Name 206 W. State Street	When was the debt incurred?	
	Rockford, IL 61101 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and unit you may and oranin to orroom an man approp	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
.3	Creditors Protection Service	Last 4 digits of account number 9543	\$322.65
ļ	Nonpriority Creditor's Name 308 W. State Street #485	When was the debt incurred?	,
	PO Box 4115		
	Rockford, IL 61110-0615 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify	
		Caron opoon,	

Debtor 1 Jonathan E. Arcouette

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Debt	or 2 Heather A. Arcouette	Case number (if know)	
4.3 5	Creditors Protection Service	Last 4 digits of account number 9543	\$258.85
<u> </u>	Nonpriority Creditor's Name 308 W. State Street #485 PO Box 4115	When was the debt incurred?	·
	Rockford, IL 61110-0615 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Creditors Protection Service	Last 4 digits of account number 2329	\$74.61
	Nonpriority Creditor's Name 308 W. State Street #485 PO Box 4115	When was the debt incurred?	
	Rockford, IL 61110-0615		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3 7	David Carper	Last 4 digits of account number	\$5,000.00
	Nonpriority Creditor's Name 951 Bluff Street South Beloit, IL 61080	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Debtor 1 Jonathan E. Arcouette

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Debtoi Debtoi	Jonathan E. Arcouette Heather A. Arcouette		Case number (if know)	
4.3	Don's Tool Sales	Last 4 digits of account number	771	\$300.00
	Nonpriority Creditor's Name 13298 Huntington Chase	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.3	First National Bank Nonpriority Creditor's Name	Last 4 digits of account number	8174	\$264.00
	345 East Grand Avenue Beloit, WI 53511	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	6971	\$465.00
	601 S. Minnesota Avenue Sioux Falls, SD 57104	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debtor Debtor	Jonathan E. Arcouette Heather A. Arcouette		Case number (if know)	
4.4	Global Healthcare	Last 4 digits of account number	2778	\$150.00
	Nonpriority Creditor's Name 4250 North Marine Drive #236 Chicago, IL 60613	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	Great American Payment Systems	Last 4 digits of account number	5962	\$500.00
	Nonpriority Creditor's Name PO Box 6600 Hagerstown, MD 21740	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.4	H&H Industries	Last 4 digits of account number	NARR	\$225.00
	Nonpriority Creditor's Name PO Box 735	When was the debt incurred?		
	Elmwood, IL 61529 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

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2 Heather A. Arcouette	Case number (if know)	
Harris & Harris	Last 4 divite of account number	\$305.63
Nonpriority Creditor's Name	Last 4 digits of account number	φ303.03
111 W. Jackson Blvd.	When was the debt incurred?	
Suite 400		
Chicago, IL 60604-4135 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam'ris. Oneok an that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	0000	* * * • • • • • • • • • • • • • • • • •
Illinois Department of Healthcare Nonpriority Creditor's Name	Last 4 digits of account number S003	\$18,539.00
509 S. 6th Street Springfield, IL 62701	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Interstate Batteries	Last 4 digits of account number 0132	\$875.00
Nonpriority Creditor's Name		
5175 American Road	When was the debt incurred?	
Rockford, IL 61109 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

Debtor 1 Jonathan E. Arcouette

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Debtoi Debtoi	1 Jonathan E. Arcouette 1 Heather A. Arcouette		Case number (if know)	
4.4	IWI	Last 4 digits of account number	1297	\$6,000.00
	Nonpriority Creditor's Name 1550 Innovation Drive Dubuque, IA 52002	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	Jerry's Auto Parts	Last 4 digits of account number	A850	\$6,000.00
	Nonpriority Creditor's Name 11943 Main Street Roscoe, IL 61073	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	Jim Lalle, CPA	Last 4 digits of account number		\$1,500.00
	Nonpriority Creditor's Name 5301 East State Street Rockford, IL 61108	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debtor Debtor	1 Jonathan E. Arcouette 2 Heather A. Arcouette		Case number (if know)	
4.5 0	Kimball Midwest	Last 4 digits of account number	1506	\$500.00
	Nonpriority Creditor's Name Department L-2780 Toledo, OH 43620-2780	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
4.5	Lurie Children's Hospital Nonpriority Creditor's Name	Last 4 digits of account number		\$18,000.00
	225 East Chicago Avenue Chicago, IL 60611	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.5	Matco Tools Nonpriority Creditor's Name	Last 4 digits of account number	2176	\$5,080.00
	4403 Allen Road Stow, OH 44224	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		

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Debtoi Debtoi	r 1 Jonathan E. Arcouette r 2 Heather A. Arcouette		Case number (if know)	
4.5 3	Medical Business Bureau	Last 4 digits of account number	3811	\$959.00
	Nonpriority Creditor's Name 1460 Renaissance Drive Park Ridge, IL 60068	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
	_	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes			
4.5 4	Medical Business Bureau	Last 4 digits of account number	5541	\$123.00
	Nonpriority Creditor's Name 1460 Renaissance Drive Park Ridge, IL 60068	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.5	Morrison's Auto	Last 4 digits of account number	Arcouette Automotive	\$500.00
	Nonpriority Creditor's Name 6307 State Road 59 W	When was the debt incurred?		*******
	Edgerton, WI 53534 Number Street City State Zlp Code	As of the date you file, the claim i	s. Chack all that annly	
	Who incurred the debt? Check one.	As of the date you me, the dam's	3. Officer all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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	Case number (if know)	
Last 4 digits of account number	3081	\$302.00
When was the debt incurred?		
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
	d claim:	
	ration agreement or divorce that you did not	
	g plans, and other similar debts	
Other. Specify		
Last 4 digits of account number	2109	\$141.00
W/h === 4h = d = h !:= == d Q		
when was the debt incurred?		
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
	d claim:	
_		
	ration agreement or divorce that you did not	
	a plans, and other similar debts	
·		
Other. Specify		
Last 4 digits of account number	1006	\$140.00
When was the debt incurred?		
As of the date you file the claim i	s: Check all that apply	
7.6 of the date you me, the claim.	C. Chook an that apply	
☐ Contingent		
<u> </u>		
	d claim:	
☐ Student loans		
☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
report as priority claims	-	
Debts to pension or profit-sharing	g plans, and other similar debts	
Other. Specify		
	When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharing Debts	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Cother. Specify Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Cothingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Cothingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Cothingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Cothingent Disputed Type of NONPRIORITY unsecured claim: Student loans Cothingent Disputed Type of NONPRIORITY unsecured claim: Student loans Cothingent Debts to pension or profit-sharing plans, and other similar debts

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Debtor	Heather A. Arcouette		Case number (if know)	
4.5	Mutual Management Services Inc. Nonpriority Creditor's Name	Last 4 digits of account number	2361	\$93.00
	7177 Crimson Ridge Drive Suite 10	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	·	g p	
	1 163	Other. Specify		
4.6	Mutual Management Services Inc. Nonpriority Creditor's Name	Last 4 digits of account number	5948	\$83.00
	7177 Crimson Ridge Drive	When was the debt incurred?		
	Suite 10			
	Rockford, IL 61107 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim i	S. Offect all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Mutual Management Services Inc. Nonpriority Creditor's Name	Last 4 digits of account number	9518	\$79.00
	7177 Crimson Ridge Drive	When was the debt incurred?		
	Suite 10 Rockford, IL 61107			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
		<u> </u>	g plane, and outer outlinal debte	
	☐ Yes	Other. Specify		

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Debtor	1 Jonathan E. Arcouette2 Heather A. Arcouette	Boodinient Tage 4	Case number (_{if know})	
	- Heather A. Arcodette			
4.6 2	Napa Auto Parts	Last 4 digits of account number	7998	\$18,820.83
	Nonpriority Creditor's Name C/O Rauch Milliken International PO Box 8390 Metairie, LA 70011-8390	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	_	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a diami.	
	Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes		,	
	☐ Yes	Other. Specify		
4.6	O'Reilly Auto Parts Nonpriority Creditor's Name	Last 4 digits of account number	0690	\$300.00
	PO Box 9464 Springfield, MO 65801-9464	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Paypal Credit	Last 4 digits of account number	1117	\$500.00
	Nonpriority Creditor's Name 9690 Deereco Road Suite 110	When was the debt incurred?		
	Lutherville Timonium, MD 21093		in Charle all that analy	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	Debtor 1 only	П		
	Debtor 2 only	Contingent		
	<u> </u>	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	_	Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No		g pians, and other similal debts	
	☐ Yes	Other. Specify		

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Debto	Heather A. Arcouette		Case number (if know)	
4.6 5	Paypal Working Capital	Last 4 digits of account number		\$4,000.00
	Nonpriority Creditor's Name 9690 Deereco Road Suite 110	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Penn Credit Nonpriority Creditor's Name	Last 4 digits of account number	5638	\$357.00
	PO Box 1259 Dept. 91047	When was the debt incurred?		
	Oaks, PA 19456 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Portfolio Recovery Service	Last 4 digits of account number	3307	\$1,147.00
	Nonpriority Creditor's Name 120 Corporate Blvd. Ste 1	When was the debt incurred?		
	Norfolk, VA 23502 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

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Debt	or 2 Heather A. Arcouette	Case number (if know)	
4.6 8	Portfolio Recovery Service	Last 4 digits of account number 6001	\$564.00
	Nonpriority Creditor's Name 120 Corporate Blvd. Ste 1	When was the debt incurred?	
	Norfolk, VA 23502 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6 9	Positive Changes Chiro	Last 4 digits of account number ARCHEA	\$175.00
3	Nonpriority Creditor's Name 5003 Hononegah Road Suite 3	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Roscoe, IL 61073 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.7 0	Rock River Disposal Nonpriority Creditor's Name	Last 4 digits of account number 7104	\$150.00
	PO Box 554044 Detroit, MI 48255-4044	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Heather A. Arcouette	Case number (if know)	
Rockford Health Physicians Nonpriority Creditor's Name Dept. 4701 Carol Stream, IL 60122-4701 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number A395 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not	\$557.0
Is the claim subject to offset?	report as priority claims	
■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Rockford Health Physicians Nonpriority Creditor's Name Dept. 4701	Last 4 digits of account number A395 When was the debt incurred?	\$252.7
Carol Stream, IL 60122-4701 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Rockford Memorial Hospital Nonpriority Creditor's Name	Last 4 digits of account number 8592	\$848.1
Dept. 4628 Carol Stream, IL 60122-4628	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	Other. Specify	

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Debtor Debtor	1 Jonathan E. Arcouette 2 Heather A. Arcouette		Case number (if know)	
4.7 4	Rockford Mercantile Agency	Last 4 digits of account number	9773	\$5,205.00
	Nonpriority Creditor's Name PO Box 5847 Rockford, IL 61125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.7 5	Rockford Mercantile Agency Nonpriority Creditor's Name	Last 4 digits of account number	8253	\$4,132.00
	PO Box 5847 Rockford, IL 61125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.7 6	Rockford Mercantile Agency Nonpriority Creditor's Name	Last 4 digits of account number	8051	\$798.00
	PO Box 5847 Rockford, IL 61125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

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Debtor Debtor	1 Jonathan E. Arcouette 2 Heather A. Arcouette		Case number (if know)	
4.7 7	Rockford Mercantile Agency	Last 4 digits of account number	9251	\$139.00
	Nonpriority Creditor's Name PO Box 5847 Rockford, IL 61125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.7	Rockford Mercantile Agency Nonpriority Creditor's Name	Last 4 digits of account number	0743	\$113.43
	PO Box 5847 Rockford, IL 61125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.7 9	Roscoe Family Dental Nonpriority Creditor's Name	Last 4 digits of account number		\$323.00
	5640 Clayton Circle Roscoe, IL 61073	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		

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Debt	Pr 2 Heather A. Arcouette	Case number (if know)	
4.8	Snap On Truck	Last 4 digits of account number	\$1,200.00
0]	Nonpriority Creditor's Name 1217 Gordon Ave. Rockford, IL 61108	When was the debt incurred?	V1,201100
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.8	Snap-On Credit LLC	Last 4 digits of account number 6289	\$4,300.00
	Nonpriority Creditor's Name PO Box 506	When was the debt incurred?	
	Gurnee, IL 60031 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.8	St. Martha's School	Shelby Last 4 digits of account number Arcouette	\$3,000.00
	Nonpriority Creditor's Name 214 Brainard Road	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Enfield, CT 06082 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify	
		- · · · 	

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Debto Debto	or 1 Jonathan E. Arcouette Heather A. Arcouette	Case number (if know)	
4.8 3	Stellar Recovery	Last 4 digits of account number 3064	\$216.00
	Nonpriority Creditor's Name PO Box 43870	When was the debt incurred?	
	Jacksonville, FL 32247		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.8 4	Swedish American Nonpriority Creditor's Name	Last 4 digits of account number 9152	\$241.15
	P.O. Box 1567 Rockford, IL 61110	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.8 5	Swedish American	Last 4 digits of account number 9621	\$175.94
	Nonpriority Creditor's Name P.O. Box 1567 Rockford, IL 61110	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify	
	30	— Other, Specify	

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Debtoi Debtoi	Jonathan E. Arcouette Heather A. Arcouette	Case number (if know)	
4.8	Swedish American Hospital	Last 4 digits of account number	\$6,000.00
0	Nonpriority Creditor's Name		
	1401 East State Street	When was the debt incurred?	
	Rockford, IL 61104 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.8	Transworld Systems Inc.	Last 4 digits of account number 5866	\$1,982.00
	Nonpriority Creditor's Name 507 Prudential Road Horsham, PA 19044	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.8	Windham Professionals	Last 4 digits of account number 1651	\$378.00
	Nonpriority Creditor's Name PO Box 1048 Salem, NH 03079-1048	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debtor 1 Jonathan E. Arcouette Debtor 2 Heather A. Arcouette Case number (if know) 4.8 \$300.00 World Financial Capital Bank Last 4 digits of account number 9 Nonpriority Creditor's Name 120 Corporate Blvd. When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

T. (-1.01-1 --

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	0-	Obligation with a second of a		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 18,539.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 170,229.94
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 188,768.94

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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			III FAUE 37 ULO4	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan E. Arco	ouette		
	First Name	Middle Name	Last Name	
Debtor 2	Heather A. Arcou	ette		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	City		Oldio	Zii Oodo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Document	Page 53 of 8	34
Fill in thi	is information to identify yo	our case:		
Debtor 1	Jonathan E. A	rcouette		
	First Name	Middle Name	Last Name	
Debtor 2	Heather A. Arc			
(Spouse if, f	iling) First Name	Middle Name	Last Name	
United St	tates Bankruptcy Court for the	e: NORTHERN DISTRICT OF II	LLINOIS	
Case nur	mber			
(if known)				☐ Check if this is an amended filing
	al Form 106H dule H: Your Co	odebtors		12/15
	you have any codebtors?	wn). Answer every question. (If you are filing a joint case, do no	t list either spouse as	a codebtor.
■ Ye	es			
		you lived in a community propert ana, Nevada, New Mexico, Puerto F		(Community property states and territories include ton, and Wisconsin.)
■ No	o. Go to line 3.			
☐ Ye	es. Did your spouse, former s	spouse, or legal equivalent live with	you at the time?	
in lir Forn	ne 2 again as a codebtor on	ly if that person is a guarantor or	r cosigner. Make sur	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State an	nd ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Joan Morin 28 Middle Road #3A Enfield, CT 06082			■ Schedule D, line 2.3 □ Schedule E/F, line □ Schedule G Credit Acceptance

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Fill	n this information to ider	ility your case.		
Deb	otor 1 Jo n	athan E. Arcouette		
	otor 2 use, if filing)	ather A. Arcouette		
Unit	ed States Bankruptcy Co	ourt for the: NORTHERN DISTR	RICT OF ILLINOIS	
Cas	e number			Check if this is:
(II Kn	own)			An amended filing
				A supplement showing postpetition chapter 13 income as of the following date:
	ficial Form 10			MM / DD/ YYYY
0	chedule I: You	ur linga a ima		
Be a supp spou	s complete and accura olying correct informati use. If you are separate	te as possible. If two married p on. If you are married and not f d and your spouse is not filing	iling jointly, and your spouse is living with you, do not include information a	12/15 I Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question
Be a supp spou	s complete and accura blying correct informati use. If you are separate the a separate sheet to the describe Emplement in your employme	te as possible. If two married pon. If you are married and not fd and your spouse is not filing his form. On the top of any add	iling jointly, and your spouse is living with you, do not include information a	Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed,
Be a supp spou attac	s complete and accura blying correct informati use. If you are separate the a separate sheet to the separate sheet s	te as possible. If two married pon. If you are married and not fd and your spouse is not filing his form. On the top of any add ployment	iling jointly, and your spouse is living with you, do not include information a itional pages, write your name and ca	I Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question Debtor 2 or non-filing spouse
Be a supp spou attac	s complete and accura blying correct informati use. If you are separate th a separate sheet to t 11: Describe Emp Fill in your employme information. If you have more than c attach a separate page	te as possible. If two married pon. If you are married and not fd and your spouse is not filing his form. On the top of any addoloyment nt ne job, with Employment status	iling jointly, and your spouse is living with you, do not include information a itional pages, write your name and ca Debtor 1 Employed	Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question Debtor 2 or non-filing spouse Employed
Be a supp spou attac	s complete and accura blying correct informati use. If you are separate th a separate sheet to t 11: Describe Emp Fill in your employme information. If you have more than o	te as possible. If two married p on. If you are married and not f d and your spouse is not filing his form. On the top of any add ployment nt me job, with Employment status ional	iling jointly, and your spouse is living with you, do not include information a itional pages, write your name and ca Debtor 1 Employed Not employed	Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed
Be a supp spou attac	s complete and accura blying correct informatiuse. If you are separate the a separate sheet to the separate sheet	te as possible. If two married p on. If you are married and not f d and your spouse is not filing his form. On the top of any add ployment nt Come job, with with Concupation Coccupation	iling jointly, and your spouse is living with you, do not include information a itional pages, write your name and ca Debtor 1 Employed	Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question Debtor 2 or non-filing spouse Employed
Be a supp spou attac	s complete and accura blying correct informatiuse. If you are separate the a separate sheet to the separate sheet shee	te as possible. If two married p on. If you are married and not f d and your spouse is not filing his form. On the top of any add ployment nt Come job, with with Concupation Coccupation	iling jointly, and your spouse is living with you, do not include information a itional pages, write your name and ca Debtor 1 Employed Not employed	Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed
Be a supp spou attac	s complete and accuratelying correct informationse. If you are separate the a separate sheet to the separate sheet sheet to the separate sheet to the separate sheet	te as possible. If two married p on. If you are married and not f d and your spouse is not filing his form. On the top of any add cloyment nt Employment status onal Occupation Occupation Employer's name e student Employer's address	iling jointly, and your spouse is living with you, do not include information a itional pages, write your name and ca Debtor 1 Employed Not employed Service Manager Hillgart's Auto Service	Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, se number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed HR Manager

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			11011-1	illing spouse
2.	\$	3,846.16	\$	8,583.36
3.	+\$	0.00	+\$_	0.00
4.	\$	3,846.16	\$	8,583.36

For Debtor 2 or

For Debtor 1

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Jonathan E. Arcouette Debtor 1 Heather A. Arcouette Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 3.846.16 8,583.36 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 684.00 1,466.00 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 0.00 Voluntary contributions for retirement plans 5c. 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 \$ 0.00 5e. Insurance 5e. \$ 1.054.56 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5q. 0.00 9.50 Other deductions. Specify: Charity 5h.+ 0.00 \$ 32.00 Purchase of Additional Vacation Days \$ \$ 0.00 165.00 \$ Savings Loan 0.00 116.16 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 6. \$ 684.00 2,843.22 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7 \$ 3,162.16 5,740.14 List all other income regularly received: 8 Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8b. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 **Unemployment compensation** 8d. hß 0.00 0.00 **Social Security** 8e. 0.00 0.00 8e. Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 Pension or retirement income 8g. 8g. 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ \$ 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 Calculate monthly income. Add line 7 + line 9. \$ 10. \$ 3.162.16 5.740.14 \$ 8.902.30 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: +\$ 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 8.902.30 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain: Debtor 2 will receive a 3% pay increase in April 2017

Official Form 106I Schedule I: Your Income page 2

Sill	in this informa	tion to identify yo	our case:			1				
	otor 1					Ch	ook i	if this is:		
Den	noi i	Jonathan E.	Arcouett	e				n amended filing		
	otor 2	Heather A. A	rcouette				ving postpetition chapte	r		
(Spo	ouse, if filing)					13	s expenses as of	the following date:		
Unit	ted States Bankr	uptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	IOIS		M	M / DD / YYYY		
	se number nown)									
Of	fficial Fo	rm 106J								
S	chedule	J: Your I	Exper	ises					12	/1
Be info nur	as complete ormation. If member (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people a ch another sheet to this	re filing together, be form. On the top of	oth are ed f any add	quall	y responsible fo al pages, write y	or supplying correct your name and case	
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold							—
	□ No. Go to									
	_	s Debtor 2 live i	n a separ	ate household?						
	■ N		•							
		_	st file Offici	al Form 106J-2, Expense	s for Separate House	ehold of D	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?	
	Do not state dependents				Daughter			15	□ No ■ Yes	
					0			40	□ No	
					Son			16	■ Yes □ No	
									☐ Yes	
							_		□ No	
3.	Do vour ovr	penses include	_						☐ Yes	
Э.		f people other th	han	No						
	yourself and	d your depende	nts? ⊔	Yes						
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance and		government assistance cluded it on <i>Schedule I:</i>				Your exp	enses	
4.				ses for your residence.	Include first mortgage	e 4	\$		1,740.00	
		nd any rent for the	- ground 0	ii iOt.		т.	٠.			
	If not includ	led in line 4:								
		estate taxes		'a inaurana		4a.			0.00	
	•	rty, homeowner's maintenance, re		's insurance ipkeep expenses		4b. 4c.			0.00 300.00	
		owner's associat				4d.			0.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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	tor 1		n E. Arcouette			
Deb	tor 2	Heather A	A. Arcouette	Case num	ber (if known)	
6	1 14:1:4:	laa.				
6.	Utiliti 6a.		heat, natural gas	6a.	\$	600.00
	6b.	-	ver, garbage collection	6b.		50.00
		-	e, cell phone, Internet, satellite, and cable services	6c.		528.00
	6d.	Other. Spe		6d.		0.00
7.			ekeeping supplies	7.	·	
7. 8.			hildren's education costs	7. 8.	\$	800.00
o. 9.	-			o. 9.	·	200.00
-		-	ry, and dry cleaning		·	300.00
		•	roducts and services	10.	·	200.00
			ntal expenses	11.	a	150.00
12.			Include gas, maintenance, bus or train fare. ar payments.	12.	\$	700.00
13.			clubs, recreation, newspapers, magazines, and books	13.	· ·	200.00
			ributions and religious donations	14.	·	
			Tibutions and religious donations	14.	Ψ	0.00
15.	Insura Do no		surance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.	\$	0.00
		Health insu		15a. 15b.	· ·	0.00
		Vehicle ins		15b. 15c.	·	350.00
					·	
40			rance. Specify: Shop Insurance	15d.	φ	145.00
16.			clude taxes deducted from your pay or included in lines 4 or 20.	16	¢	0.00
47	Speci			16.	Ф	0.00
17.			ease payments: ents for Vehicle 1	17a.	c	276.00
			ents for Vehicle 1		·	376.00
		. ,		17b.	· —	372.00
			ecify: Car payments for Vehicle 3	17c.	·	300.00
	1/d.		Pet Expenses (food, boarding, vet)	17d.	·	300.00
	-		Brian Larkin		\$	200.00
			Thomas Ruud		\$	100.00
		Jim Lalle			\$	150.00
18.			of alimony, maintenance, and support that you did not report		•	0.00
			your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.		0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Speci			19.		
20.			erty expenses not included in lines 4 or 5 of this form or on Sc			
			s on other property	20a.		0.00
		Real estate		20b.	•	0.00
			nomeowner's, or renter's insurance	20c.		0.00
	20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowne	er's association or condominium dues	20e.	\$	0.00
21.	Other	r: Specify:		21.	+\$	0.00
00			41			
22.		-	monthly expenses			
		Add lines 4	•	_	\$	8,061.00
	22b. (Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
	22c. A	Add line 22a	a and 22b. The result is your monthly expenses.		\$	8,061.00
00	Calan		ar and bloom of the course			
∠3.			monthly net income. 12 (your combined monthly income) from Schedule I.	23a.	¢	0.000.00
						8,902.30
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	8,061.00
	00-	Ols.4	and the second s			
	23C.		our monthly expenses from your monthly income.	23c.	\$	841.30
		rne result	is your monthly net income.	200.		3
24	Do vo	nii expect s	an increase or decrease in your expenses within the year after	vou file this	form?	
۷4.			ou expect to finish paying for your car loan within the year or do you expect you			crease or decrease because of a
			terms of your mortgage?		. ,	
	■ No	O.				
	☐ Ye		Explain here:			

=						ı
Fill in this i	nformation to identify your	case:				
Debtor 1	Jonathan E. Arco	ouette				
	First Name	Middle Name	Last N	lame		
Debtor 2	Heather A. Arcou					
(Spouse if, filing	g) First Name	Middle Name	Last N	lame		
United State	es Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS			
Case number	er					
(if known)						☐ Check if this is an
						amended filing
o	- 4005					
	Form 106Dec					
Declai	ration About a	an Individual	l Debto	r's	Schedules	12/15
If two marrie	ed people are filing togethe	r, both are equally respo	onsible for sup	plyir	g correct information.	
Vou must fil	la this form whonover you f	ilo hankruntov schodulo	e or amondod	ccho	dulas Making a falsa sta	tement, concealing property, or
						000, or imprisonment for up to 20
	th. 18 U.S.C. §§ 152, 1341,		.,,		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	l					
	Sign Below					
Distant		ana wha ia NOT an atta		£:I	l aut handmuntou famo 2	
Dia yo	ou pay or agree to pay some	one who is NOT an atto	rney to neip y	ou III	out bankruptcy forms?	
■ N	0					
	on Name of parage				Attach Par	nkruptcy Petition Preparer's Notice,
☐ Y	es. Name of person					on, and Signature (Official Form 119)
						.,
	penalty of perjury, I declare ey are true and correct.	that I have read the sun	nmary and sch	nedul	es filed with this declarat	ion and
tilat tile	ey are true and correct.					
X /s/	Jonathan E. Arcouette		X/	s/ He	ather A. Arcouette	
	nathan E. Arcouette		-		er A. Arcouette	
Sig	nature of Debtor 1		5	Signat	ure of Debtor 2	
Dat	te February 24, 2017		Г	Date	February 24, 2017	

		nation to identify you				
De	btor 1	Jonathan E. Arc	Middle Name	Last Name		
1	ebtor 2 ouse if, filing)	Heather A. Arco	wette Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number _				ПС	heck if this is an
Ì	,					mended filing
	fficial Fo					
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for support of additional pages, write you	
		n). Answer every que			,,	
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	MarriedNot mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	'.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	_	ake sure you fill out <i>Sci</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
	· ·	. ,				
4.	Fill in the tota	al amount of income yo	u received from all jobs and a	ig a business during this yeall businesses, including parte e together, list it only once ur		idar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calenda anuary 1 to De	r year: ecember 31, 2016)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$102,385.00
			☐ Operating a business		☐ Operating a business	

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Debtor 2 Heather A. Arcouette					Case number (if known)						
				Debtor 1				De	btor 2		
					of income that apply.	(before	s income re deductions and sions)		urces of ind eck all that a		Gross income (before deductions and exclusions)
		dar year be December		☐ Wages bonuses,	s, commissions, tips		\$0.0	_	Wages, con nuses, tips	nmissions,	\$84,564.44
				☐ Opera	ting a business				Operating a	business	
5.	Include in and other	come regard public bene	dless of whet fit payments;	her that inco pensions; r		amples o rest; divid	f other income ar dends; money co	re alimon llected fro	om lawsuits;	royalties; and	ecurity, unemployment d gambling and lottery
	List each	source and	the gross inc	ome from ea	ach source separa	tely. Do ı	not include incom	ne that yo	u listed in lir	ne 4.	
	■ No										
	☐ Yes	Fill in the de	etails.								
				Debtor 1 Sources Describe	of income below.	each (before	s income from source re deductions and sions)	So De	btor 2 urces of ind scribe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	avments You	Made Refe	ore You Filed for	Rankrur	ntcv				
6.	■ No.	Neither Dindividual During the No. Yes * Subject	ebtor 1 nor I primarily for a e 90 days before Go to line 7 List below paid that or not include to adjustmen	Debtor 2 ha a personal, fore you filed 7. each creditoreditor. Do no payments to 4/01/19	amily, or household for bankruptcy, did not to whom you paid to tinclude payment or an attorney for the pand every 3 years	umer del Id purpos d you pa id a total hts for do his banki s after th	ots. Consumer disc." by any creditor a the of \$6,425* or more mestic support or property case. at for cases filed	total of \$6 ore in one	or more pages, such as cl	ore? yments and the	I (8) as "incurred by an ne total amount you nd alimony. Also, do
	☐ Yes	During the	90 days befo	ore you filed	e primarily consu for bankruptcy, di			total of \$6	600 or more	?	
		□ No. □ Yes	include pay	each credito							creditor. Do not nolude payments to an
	Credito	's Name an	d Address		Dates of payme	ent	Total amount paid		ount you still owe	Was this p	ayment for
7.	Insiders in of which y	nclude your ou are an o	relatives; any fficer, directo	general par r, person in		any geno of 20% or	eral partners; par r more of their vo	rtnerships oting secu	of which you	ou are a gene ny managing	ral partner; corporation agent, including one fo
	■ No										
	☐ Yes	List all payr	ments to an ir	nsider.							
	Insider's	Name and	Address		Dates of payme	ent	Total amount paid		ount you still owe	Reason fo	r this payment

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De	Heather A. Arcouette		Case number (if	known)		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer any propert	y on account of a d	lebt that benefited ar	
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount Amount paid still		r this payment ditor's name	
Pa	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	Status of the	Status of the case	
	Citizens Finance of Illinois v.	Small Claims	Winnebago County Circu	uit 🔲 Pending	☐ Pending	
	Jonathan E. Arcouette et al. 17 SC 37	Clerk 400 West State Street Rockford, IL 61101		☐ On appeal ☐ Concluded		
	No. Go to line 11. Yes. Fill in the information below.			Date		
	Creditor Name and Address	Describe the Property			Value of the property	
	OW.	Explain what happene	d	September	40 500 00	
	Citizens Finance 6457 North 2nd Street	Acura MDX	Acura MDX		\$2,500.00	
	Loves Park, IL 61111	Property was repossessed.				
		☐ Property was foreclos ☐ Property was garnish				
	_ ' '		ned, seized or levied.			
		Troperty was attache	u, scized of levicu.			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed		luding a bank or financial inst	itution, set off any	amounts from your	
	Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amoun	
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possession of an as	ssignee for the ben	efit of creditors, a	
	∐ Yes					

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Del	btor 2 Heather A. Arcouette		Case n	umber (i	if known)			
Par	rt 5: List Certain Gifts and Contribu	tions						
13.	Within 2 years before you filed for ba ■ No □ Yes. Fill in the details for each gift.	nkruptcy,	did you give any gifts with a total value of r	more th	an \$600 per person	?		
	Gifts with a total value of more than per person	\$600	Describe the gifts		Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift a Address:	and						
14.	Within 2 years before you filed for ba ■ No	nkruptcy,	did you give any gifts or contributions with	n a total	value of more than	\$600 to any charity?		
	☐ Yes. Fill in the details for each gift	or contribut	tion.					
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value		
Par	rt 6: List Certain Losses							
15.	Within 1 year before you filed for ban or gambling?	kruptcy or	since you filed for bankruptcy, did you los	se anyth	ning because of the	t, fire, other disaster		
	□ No							
	Yes. Fill in the details.							
	how the loss occurred Inclu		scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.		Date of your Value of loss	Value of property lost		
					1000			
			rance paid \$7,300.00 for loss		11/2016	\$8,000.00		
	consulted about seeking bankruptcy	kruptcy, d or prepari	id you or anyone else acting on your behal ng a bankruptcy petition? rs, or credit counseling agencies for services r		, ,	rty to anyone you		
	include any altorneys, bankrupicy petition	on preparei	is, or credit counseling agencies for services r	equirea	in your bankrupicy.			
	■ No							
	Yes. Fill in the details.		Description and value of any property		Data naumant	Amount of		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if N	ot You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
17.		creditors o	id you or anyone else acting on your behal or to make payments to your creditors? ted on line 16.	lf pay o	r transfer any prope	rty to anyone who		
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
					made			

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Debtor 2 Heather A. Arcouette Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance closed, sold, Address (Number, Street, City, State and ZIP account number instrument before closing or Code) moved, or transfer transferred First National Bank & Trust XXXX-8174 02/2016 \$0.00 Checking □ Savings ☐ Money Market □ Brokerage □ Other **Advia Credit Union** XXXX-08/2016 \$0.00 Checking 769 North Blackhawk Road □ Savings Rockton, IL 61072 ■ Money Market □ Brokerage □ Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Describe the contents Do you still Name of Financial Institution Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Describe the contents Name of Storage Facility Who else has or had access Do you still have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code)

Debtor 1

Jonathan E. Arcouette

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Debtor 1 Jonathan E. Arcouette
Debtor 2 Heather A. Arcouette

Case number (if known)

	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
	Executive Lawn Service Main Street Rockton, IL 61072	Brian Hansmeier (owner)	Automotive repair tools	■ No □ Yes					
Par	19: Identify Property You Hold or Control for	Someone Else							
-	for someone.								
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	Give Details About Environmental Inform	nation							
For t	he purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used					
_	Hazardous material means anything an environ	nmental law defines as a hazardous	s waste, hazardous substance, toxic	substance,					
_	hazardous material, pollutant, contaminant, or								
-	ort all notices, releases, and proceedings that y		•						
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site	Governmental unit	Environmental law, if you	Date of notice					
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State an ZIP Code)	d know it						
25. Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admini	istrative proceeding under any env	ironmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	Give Details About Your Business or Con	nnections to Any Business							
27.	27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								

Entered 02/24/17 15:20:07 Case 17-80384 Doc 1 Filed 02/24/17 Desc Main Page 65 of 84 Document Jonathan E. Arcouette Debtor 1 Debtor 2 Heather A. Arcouette Case number (if known) A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Arcouette's Garage DBA Arcouette **Auto Mechanic** 47-3258626 Automot From-To 2015-2016 **Ron Nelson** 14440 Dearnborn Avenue South Beloit, IL 61080 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jonathan E. Arcouette /s/ Heather A. Arcouette Heather A. Arcouette Jonathan E. Arcouette Signature of Debtor 1 Signature of Debtor 2 Date February 24, 2017 Date February 24, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:Debtors will ideally be more apt to follow through with the plan if they have invested in
 - Debtors will ideally be more apt to follow through with the plan if they have invested in the preparation of said plan prior to filing.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$1,500.00; and \$500.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: February 24, 2017	6	
Signed:		
/s/ Jonathan E. Arcouette	/s/ Erin Nash	
Jonathan E. Arcouette	Erin Nash	
	Attorney for the Debtor(s)	
/s/ Heather A. Arcouette	•	
Heather A. Arcouette		
Debtor(s)		
, ,		

Local Bankruptcy Form 23c

Do not sign this agreement if the amounts are blank.

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Jonathan E. Arcouette Heather A. Arcouette		Case No.			
	Ticuliei Al Arobucto	Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPENSA	TION OF ATTOI	RNEV FOR DE	TRTOR(S)		
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ompensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or i	certify that I am the attorr	ney for the above name or agreed to be paid	ned debtor(s) and that to me, for services rendered or to		
	· · · · · · · · · · · · · · · · · · ·			2,000.00		
	Prior to the filing of this statement I have received			500.00		
	Balance Due			1,500.00		
2. Т	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. Т	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. I	■ I have not agreed to share the above-disclosed compensat	ion with any other person	unless they are mem	bers and associates of my law firm.		
I	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names o					
5. 1	In return for the above-disclosed fee, I have agreed to render	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b c	Analysis of the debtor's financial situation, and rendering a Preparation and filing of any petition, schedules, statemen Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications a 522(f)(2)(A) for avoidance of liens on househouse.	t of affairs and plan which d confirmation hearing, ar ce to market value; exc s needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof;		
6. E	By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischar- any other adversary proceeding.	s not include the following rgeability actions, judi	g service: cial lien avoidance	es, relief from stay actions or		
	CF	ERTIFICATION				
	certify that the foregoing is a complete statement of any agreankruptcy proceeding.	eement or arrangement for	payment to me for re	epresentation of the debtor(s) in		
Fe	ebruary 24, 2017	/s/ Erin Nash				
	ate	Erin Nash Signature of Attorne Loves Park Lega 535 Loves Park IL 61 815-654-3060 Fa erin.nash1@gma Name of law firm	Clinic Prive 111 x: 815-654-9893			

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United States Bankruptcy Court Northern District of Illinois

In re	Jonathan E. Arcouette Heather A. Arcouette		Case No.			
		Debtor(s)	Chapter 13			
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors:		68		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to t	the best of my		
Date:	February 24, 2017	/s/ Jonathan E. Arcouette				
		Jonathan E. Arcouette				
		Signature of Debtor				
Date:	February 24, 2017	/s/ Heather A. Arcouette				
	-	Heather A. Arcouette				
		Signature of Debtor				

ABC Fire and Safety PO Box 922 Beloit, WI 53512-0922

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Advia Credit Union 769 N Blackhawk Blvd. Rockton, IL 61072

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Associated Collectors Inc. 113 W. Milwaukee Street Janesville, WI 53545

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Attorney Thomas Ruud 318 North 1st Street Rockford, IL 61107

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Bud Weiser Motors 2676 Milwaukee Road Beloit, WI 53511

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Capital Stack LLC 11 Broadway Suite 814 New York, NY 10004

Central Credit Services 20 Corporate Hills Drive Saint Charles, MO 63301

Charter Business Solutions 12405 Powerscourt Drive Saint Louis, MO 63131

Chase Bank PO Box 9001871 Louisville, KY 40290

Chicago Behavioral Health 555 Wilson Lane Des Plaines, IL 60016

Citizens Finance 6457 North 2nd Street Loves Park, IL 61111

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